

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 723672

Entity Name: THE FOUNTAINS OF PALM BEACH CONDOMINIUM, INC. NO. 4**Current Principal Place of Business:**4615 FOUNTAINS DR.
SUITE B
LAKE WORTH, FL 33467**Current Mailing Address:**4615 FOUNTAINS DR.
SUITE B
LAKE WORTH, FL 33467 US**FEI Number:** 59-1511441**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**POULETTE,DEBBIE
4615 FOUNTAINS DR.
SUITE B
LAKE WORTH, FL 33467 US*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.***SIGNATURE:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title VPD
Name GROSSMAN, JOEL
Address 4822 ESEDRA COURT
#306
City-State-Zip: LAKE WORTH FL 33467

Title D
Name STORCH, RHODA
Address 4817 ESEDRA CT
City-State-Zip: LAKE WORTH FL 33467

Title SD
Name DIAMOND, ALAN
Address 4793 ESEDRA COURT
#301
City-State-Zip: LAKE WORTH FL 33467

Title D
Name DUNBAR, CALVIN
Address 4838 ESEDRA COURT
#302
City-State-Zip: LAKE WORTH FL 33467

Title PD
Name HOROWITZ, MORTON
Address 4833 ESEDRA COURT
#306
City-State-Zip: LAKE WORTH FL 33467

Title TD
Name FLEISCHMAN, ALFRED
Address 4801 ESEDRA COURT
#301
City-State-Zip: LAKE WORTH FL 33467

Title D
Name DRAIZIN, MARILYN
Address 4795 ESEDRA CT.
City-State-Zip: LAKE WORTH FL 33467

Title D
Name LAMAY, FRED
Address 4838 ESEDRA COURT
#203
City-State-Zip: LAKE WORTH FL 33467

Continues on page 2

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MORTON HOROWITZ

PRESIDENT

02/13/2014

Electronic Signature of Signing Officer/Director Detail_____
Date

Officer/Director Detail Continued :

Title	D
Name	TILLY, CARLOS
Address	1101 BRICKELL AVENUE #604-5
City-State-Zip:	MIAMI FL 33131